# Provide the Hospital Owner and Year of Report per Section 130061(e)

Facility Number:	11034	
Facility Name:	Sutter M	edical Center of Santa Rosa - Chanate
Address:	3325 Ch	anate Road
City:	Santa Ro	osa
Hospital Owner/Lice	ensee:	Sutter Medical Center of Santa Rosa
Year of Rep	orting:	2010
Contact 1 e-mail Ad	dress:	
Contact 2 e-mail Ad	dress:	
Contact 3 e-mail Add	dress::	
Name of Sub	mitter:	Carl Scheuerman
Submission	Date:	1/19/2011 3:52:03 PM

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For buildings which are planned for retrofit or replacement the report shall identify: Whether the hospital owner intends to retrofit or replace the building to SPC 2 or SPC 5 per section 130061(c)(1)(A). The deadline, as described in Section 130060 or 130061.5, for retrofit or replacement of the bulding that the hospital owner intends to meet, and the applicable extension for which the hospital owner has been approved per Section 130061(c)(1)(B)

Bldg. No.	Building Name	Alternate Building Address	Building Resolution	Final SPC Rating If Required	Extension Date	Anticipated Completion Date
01	Original Hospital	3325 Chanate Road	Replace	SPC5	01/01/2015	10/15/2014
02	East Wing	3325 Chanate Road	Replace	SPC5	01/01/2015	10/15/2014
03	Central Wing	3325 Chanate Road	Replace	SPC5	01/01/2015	10/15/2014
04	West Wing	3325 Chanate Road	Replace	SPC5	01/01/2015	10/15/2014
05	Dietary / Storage	3325 Chanate Road	Replace	SPC5	01/01/2015	10/15/2014
06	1972 Building	3325 Chanate Road	Replace	SPC5	01/01/2015	10/15/2014
07	Boiler Building	3325 Chanate Road	Replace	SPC5	01/01/2015	10/15/2014
09	Morgue / Storage	3325 Chanate Road	Replace	SPC5	01/01/2015	10/15/2014

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For each building which is planned for retrofitting or replacement, provide the project numbers, per Section 130061(c)(1)(C). The projected construction start date or dates and projected Completion date or dates per Section 130061(c)(1)(D) and the most recent project status and approvals per Section 130061(c)(1)(E).

Building No: 01	Original Hospital	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
18187 IS082123	0 PPR-SB 1661-NEW REPLACEMENT HOSPITAL	12/01/2008 09/15/2010 10/15/2014 OPEN Yes
Building No: 02	East Wing	Retrofit/Replacement Yes-Submitted Project:
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
18187 IS082123	0 PPR-SB 1661-NEW REPLACEMENT HOSPITAL	12/01/2008 09/15/2010 10/15/2014 OPEN Yes
Building No: 03	Central Wing	Retrofit/Replacement Yes-Submitted Project:
Building No: 03  Facility Project Sub Number Number Num	Central Wing Scope	
Facility Project Sub		Date Plan Approved Proj. Start Proj. Completed Status CEQA
Facility Project Sub Number Number Num	Scope  0 PPR-SB 1661-NEW REPLACEMENT	Project:  Date Plan Approved Proj. Start Proj. Completed Status CEQA in Date Date Review
Facility Project Sub Number Number Num 18187 IS082123	Scope  0 PPR-SB 1661-NEW REPLACEMENT HOSPITAL	Project:  Date Plan Approved Proj. Start Proj. Completed Status CEQA Review  12/01/2008 09/15/2010 10/15/2014 OPEN Yes  Retrofit/Replacement Yes-Submitted

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Building No: 05	Dietary / Storage	Retrofit/Replacement Ye Project:	s-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed in Date Date Date	Status CEQA Review
18187 IS082123	0 PPR-SB 1661-NEW REPLACEMENT HOSPITAL	12/01/2008 09/15/2010 10/15/2014	OPEN Yes
Building No: 06	1972 Building	Retrofit/Replacement Ye Project:	s-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed in Date Date Date	Status CEQA Review
18187 IS082123	0 PPR-SB 1661-NEW REPLACEMENT HOSPITAL	12/01/2008 09/15/2010 10/15/2014	OPEN Yes
Building No: 07	Boiler Building	Retrofit/Replacement Ye Project:	s-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed in Date Date Date	Status CEQA Review
18187 HS102005	0 CENTRAL UTILITY PLANT	10/20/2010 06/01/2011 10/01/2013	OPEN Yes
Building No: 09	Morgue / Storage	Retrofit/Replacement Ye Project:	s-Submitted
Facility Project Sub Number Number Num	Scope	Date Plan Approved Proj. Start Proj. Completed in Date Date Date	Status CEQA Review
18187 IS082123	0 PPR-SB 1661-NEW REPLACEMENT HOSPITAL	12/01/2008 09/15/2010 10/15/2014	OPEN Yes

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## Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: 01	Buildir	ng Name: Original Hospital		
Type of Service Prov	<u>rided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	X Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging  Pharmaceutical	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration Support	Renal Dialysis Outpatient
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Services  Obstetrical	Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

#### Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

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Building Number: 02	Buildii	ng Name: East Wing		
Type of Service Prov	<u>rided</u>			
X Nursing	Inpatient Beds	9 Inpatient 747 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

#### Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

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Building Number: 03	Buildi	ng Name: Central Wing		
Type of Service Prov	<u>rided</u>			
X Nursing	Inpatient Beds	62 Inpatient 5147 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
X Obstetrical Ante/Postprtum	Inpatient Beds	3 Inpatient Days 379	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services  Obstetrical	Outpatient Surgery
		Total Beds this Building 65	Cesarean/Deliv	Central Plant

#### Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

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Building Number: 04	Buildi	ng Name: West Wing		
Type of Service Prov	<u>rided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	X Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Pharmaceutical Dietetic	X Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0  Total Beds this	Support Services  Obstetrical Cesarean/Deliv	Outpatient Surgery
		Building	Cesaleal/Deliv	Central Plant

Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

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Building Number: 05	Buildi	ng Name: Dietary / Storage			
Type of Service Prov	Type of Service Provided				
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery	
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby	
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency	
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging  Pharmaceutical	Nuclear Medicine	
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	X Dietetic	Rehabilitation Therapy	
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration  X Support	Renal Dialysis  Outpatient	
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0  Total Beds this 0	Services  Obstetrical Cesarean/Deliv	Surgery  Central Plant	
		Building			

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#### Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: 06	Buildi	ng Name: 1972 Building		
Type of Service Prov	<u>/ided</u>			
X Nursing	Inpatient Beds	20 Inpatient 1660 Days	X Surgical	X Obstetrical Recovery
X IntensiveCare	Inpatient Beds	26 Inpatient Days 2514	X Anesthesia	X Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	X Radiological/ Imaging  Pharmaceutical	X Nuclear Medicine
X Obstetrical Ante/Postprtum	Inpatient Beds	18 Inpatient Days 2271	Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration Support	Renal Dialysis  Outpatient
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Services  X Obstetrical	Surgery
		Total Beds this Building 64	Cesarean/Deliv	Central Plant

#### Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

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Building Number: 07	Buildi	ing Name: Boiler Building		
Type of Service Prov	<u>/ided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	Support Services	Outpatient Surgery
	2000	Total Beds this Building	Obstetrical Cesarean/Deliv	X Central Plant

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## Provide the number of inpaient beds and patient days per type of service per building per Section 130061(c)(1)(F)

Building Number: 09	Buildi	ng Name: Morgue / Storage		
Type of Service Prov	<u>rided</u>			
Nursing	Inpatient Beds	0 Inpatient 0 Days	Surgical	Obstetrical Recovery
IntensiveCare	Inpatient Beds	0 Inpatient Days 0	Anesthesia	Newborn/ WellBaby
Pediatric/Adol escent	Inpatient Beds	0 Inpatient Days 0	Clinical Lab	Emergency
Psychiatric Nursing	Inpatient Beds	0 Inpatient Days 0	Radiological/ Imaging	Nuclear Medicine
Obstetrical Ante/Postprtum	Inpatient Beds	0 Inpatient Days 0	Pharmaceutical Dietetic	Rehabilitation Therapy
Intermediate Care	Inpatient Beds	0 Inpatient Days 0	Administration	Renal Dialysis
Skilled Nursing	Inpatient Beds	0 Inpatient Days 0	X Support Services Obstetrical	Outpatient Surgery
		Total Beds this Building	Cesarean/Deliv	Central Plant

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Building Number:	01 B	uilding Name: Origi	nal Hospital		
Medical / Surgical (	Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number:	02	Building Name:	East Wing		
Medical / Surgical	(Include GYN)	Acute Respir	atory Care	Acute Psychiatric	
Inpatient 9 Bed	Inpatient 747 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Car Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Intensive Care		Rehabilitatior Center	1	Int. Care / developm Disabled	ent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Coronary Care		Chemical Dependency		<b>Building Per</b>	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	9	9

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Building Number:	03	Building Name:	Central Wing		
Medical / Surgical	(Include GYN)	Acute Respir	atory Care	Acute Psychiatric	
Inpatient 62 Bed	Inpatient 5147 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Car Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Intensive Care		Rehabilitation Center	ı	Int. Care / developm Disabled	ent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Coronary Care		Chemical Dependency		<b>Building Per</b>	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	62	65

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Building Number:	04	Building Name: Wes	st Wing		
Medical / Surgical	(Include GYN)	Acute Respirator	y Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Ne Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	nent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number:	05	Building Name:	ietary / Storage		
Medical / Surgical	(Include GYN)	Acute Respirato	ory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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Building Number:	06	Building Name: 1972	2 Building		
Medical / Surgical	(Include GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 20 Bed	Inpatient 1660 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 18 Bed	Inpatient 2271 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care New Nursery	vborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 10 Bed	Inpatient 998 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
Inpatient 16 Bed	Inpatient 1516 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	64	64

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Building Number:	07	Building Name:	Boiler Building		
Medical / Surgical	(Include GYN)	Acute Respira	atory Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nursery	e Newborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developm Disabled	ent
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days		Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient Bed	0 Inpatient 0 Days	0	0

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Building Number:	09	Building Name: Mo	orgue / Storage		
Medical / Surgical	(Include GYN)	Acute Respirator	ry Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse	Newborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care No Nursery	ewborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / developr Disabled	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0

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For all buildings at the facility, indicate which ones are scheduled for general acute service removal.

Building Number	Building Name	Building to be Removed
01	Original Hospital	
02	East Wing	
03	Central Wing	
04	West Wing	
05	Dietary / Storage	
06	1972 Building	
07	Boiler Building	
08	Power Plant Building	$\overline{\sqcap}$
09	Morgue / Storage	

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## List ALL proposed new buildings to be constructd at this or another site.

Building Number	Building Name	New Site	
N_1	New Hospital	X	
N_2	New East Wing	X	
N_3	New Plant	X	

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Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	01	Building Name:	Original Hospital							
Type of Service Provided										
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	Nursing		Anesthesia							
	IntensiveCare			Obstetrical Recovery		Renal Dialysis				
	Pediatric/Adol escent	X	Clinical Lab			Outpatient				
			Radiological/ Imaging	Newborn/ WellBaby		Surgery				
	Psychiatric Nursing		T Pharmaceutical	Emergency		Central Plant				
	Obstetrical									
	Ante/Postprtum		Dietetic	Nuclear Medicine		Support Services				
	Intermediate Care		٦							
	Skilled Nursing		Administration							

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Building Number:	02	Building Name:	East Wing			
Type of Service	Provided					
			Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy	
X	Nursing		Anesthesia			
	IntensiveCare	,		Obstetrical Recovery	Renal Dialysis	
	Pediatric/Adol		Clinical Lab		Outpatient	
	escent		Radiological/	Newborn/ WellBaby	Surgery	
	Psychiatric Nursing		Imaging  Pharmaceutical	Emergency	Central Plant	
	Obstetrical		_ Friamiaceulicai	Emergency	Central Flant	
	Ante/Postprtu	m   _	Dietetic	Nuclear Medicine	Support Services	
	Intermediate		_			
	Care		Administration			
П	Skilled Nursin	g				

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Building Number:	03	Building Name:	Central Wing								
Type of Service Provided											
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
X	Nursing		Anesthesia								
	IntensiveCare	,	_	Obstetrical Recovery		Renal Dialysis					
	Pediatric/Adol	,   L	Clinical Lab			Outpatient					
			Radiological/ Imaging	Newborn/ WellBaby		Surgery					
Ш	Psychiatric Nursing		Pharmaceutica	Emergency		Central Plant					
X	Obstetrical Ante/Postprtu	m		Nuclear		Support					
	i iiii		Dietetic	Medicine		Services					
	Intermediate Care		Administration								
	Skilled Nursin	g									

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Building Number:	04	Building Name:	West Wing							
Type of Service Provided										
			Surgical	Obstetrical Cesarean/Deliv	X	Rehabilitation Therapy				
	Nursing		Anesthesia							
	IntensiveCare	·		Obstetrical Recovery		Renal Dialysis				
	Pediatric/Adol		Clinical Lab			Outpatient				
			Radiological/ Imaging	Newborn/ WellBaby		Surgery				
Ш	Psychiatric Nursing	×	_	X Emergency		Central Plant				
	Obstetrical Ante/Postprtu	m		Nuclear		Support				
	, and, a coupitu	···   [	Dietetic	Medicine	Ш	Services				
	Intermediate Care		Administration							
	Skilled Nursin	g								

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Building Number:	05	Building Name:	Dietary / Storage							
Type of Service Provided										
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy				
	Nursing		Anesthesia							
	IntensiveCare			Obstetrical Recovery		Renal Dialysis				
	Pediatric/Adol		Clinical Lab	_		Outpatient				
	escent		Radiological/	Newborn/ WellBaby	Ш	Surgery				
	Psychiatric Nursing		Imaging	Emorgonov		Control Plant				
	Obstatnical		Pharmaceutical	Emergency	Ш	Central Plant				
	Obstetrical Ante/Postprtui	m x	X Dietetic	Nuclear Medicine	X	Support Services				
	Intermediate		_							
	Care		Administration							
	Skilled Nursin	g								

Report any general acute care hospital inpatient service that is provided in any genaral acute care hospital building that is rated SPC-1 per Section 130061(c)(4)

Building Number:	06	Building Name:	1972 Building								
Type of Service Provided											
		X	Surgical	X Obstetrical Cesarean/Deliv		Rehabilitation Therapy					
X	Nursing	X	Anesthesia								
X	IntensiveCare	3		X Obstetrical Recovery		Renal Dialysis					
	Pediatric/Ado	,   [	Clinical Lab			Outpatient					
	escent	X	Radiological/	X Newborn/ WellBaby		Surgery					
	Psychiatric Nursing		Pharmaceutical	Emergency		Central Plant					
X	Obstetrical Ante/Postprtu	m		X Nuclear		Support					
	7 title/1 ootpita	""   <u> </u>	Dietetic	Medicine Medicine		Services					
	Intermediate Care		Administration								
П	Skilled Nursin	ng									

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Building Number:	07	Building Name:	Boiler Building			
Type of Service	e Provided					
			Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia			
	IntensiveCare			Obstetrical Recovery		Renal Dialysis
_	Pediatric/Adol	,   [	Clinical Lab	_		Outpatient
Ш	escent		Radiological/	Newborn/ WellBaby		Surgery
	Psychiatric Nursing		Imaging	- Fmorgonov		0 ( 15)
	Object of the last		Pharmaceutical	Emergency	X	Central Plant
	Obstetrical Ante/Postprtu	m	Dietetic	Nuclear Medicine		Support Services
	Intermediate		_			
	Care		Administration			
	Skilled Nursin	g <b> </b>				

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Building Number:	09	Building Name:	Morgue / Storage			
Type of Servic	e Provided	[	Surgical	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	Nursing		Anesthesia	Obstetrical		Renal Dialysis
	IntensiveCare Pediatric/Ado escent	Г	Clinical Lab	Recovery		Outpatient Surgery
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby		Surgery
	Obstetrical Ante/Postprtu		Pharmaceutical	Emergency  Nuclear		Central Plant Support
	Intermediate		Dietetic	Medicine		Services
_	Care		Administration			
	Skilled Nursin	ng				

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Numbe	r: 01	Building Na	me: Original Hospital		
Configuration :	Replace with new	SPC 5 and N	NPC 4 or NPC 5 building		
Type of Serv	rice Provided				
	Nursing		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia	Obstetrical	Renal Dialysis
	Pediatric/Adol escent	X	Clinical Lab	Recovery	
	Psychiatric Nursing		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical	Emergency	Central Plant
	Intermediate Care		Dietetic		Comment
	Skilled Nursing		Administration	Nuclear Medicine	Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Numbe	er: 02	Building Na	me: East Wing				
Configuration	Replace with new	SPC 5 and N	NPC 4 or NPC 5 building	)			
Type of Ser	vice Provided						
X	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	Intermediate		Dietetic	_	Lineigonoy	_	Comun Idin
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Numb	er: 03	Building Na	me: Central Wing			
Configuration:	Replace with new	SPC 5 and N	NPC 4 or NPC 5 building	9		
Type of Ser	vice Provided					
X	Nursing		Surgical		Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery	
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby	Outpatient Surgery
X	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	Central Plant
	Intermediate		Dietetic			
	Care Skilled Nursing		Administration		Nuclear Medicine	Support Services

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number:	04	Building Na	me: West Wing				
Configuration :	Replace with new	SPC 5 and N	NPC 4 or NPC 5 buildin	g			
Type of Servi	ce Provided						
1	Nursing		Surgical		Obstetrical Cesarean/Deliv	Х	Rehabilitation Therapy
I	ntensiveCare		Anesthesia	П	Obstetrical	П	Renal Dialysis
	Pediatric/Adol escent		Clinical Lab	_	Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum	X	Pharmaceutical	X	Emergency		Central Plant
	ntermediate Care		Dietetic				
	Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number:	05	Building Na	me: Dietary / Storag	je			
Configuration :	Replace with new	SPC 5 and N	NPC 4 or NPC 5 build	ing			
Type of Servic	e Provided						
N	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
In	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	ediatric/Adol scent		Clinical Lab		Recovery		
	sychiatric lursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
_	bstetrical nte/Postprtum		Pharmaceutical		Emergency		Central Plant
	itermediate	X	Dietetic		Linergency		Ocilliai Flant
	are				Nuclear Medicine	X	Support Services
S	killed Nursing		Administration				

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	: 06	Building Na	me: 1972 Building				
Configuration :	Replace with new	SPC 5 and I	NPC 4 or NPC 5 buildi	ing			
Type of Servi	ce Provided						
X	Nursing	X	Surgical	X	Obstetrical Cesarean/Deliv		Rehabilitation Therapy
X	IntensiveCare	X	Anesthesia	X	Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing	X	Radiological/ Imaging	X	Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	П	Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration	X	Nuclear Medicine		Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number	er: 07	Building Na	me: Boiler Building				
Configuration :	Replace with new	SPC 5 and N	NPC 4 or NPC 5 building	g			
Type of Service Provided							
	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	IntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency	X	Central Plant
	Intermediate		Dietetic				
	Care Skilled Nursing		Administration		Nuclear Medicine		Support Services

Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number:	08	Building Na	me: Power Plant Bui	lding				
Configuration : Replace with new SPC 5 and NPC 4 or NPC 5 building								
Type of Service Provided								
Nu	ursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy	
In	tensiveCare		Anesthesia		Obstetrical		Renal Dialysis	
	ediatric/Adol scent		Clinical Lab		Recovery			
	sychiatric ursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery	
	bstetrical nte/Postprtum		Pharmaceutical		Emergency	X	Central Plant	
	termediate		Dietetic					
	are killed Nursing		Administration		Nuclear Medicine		Support Services	

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Report the final configuration of all buildings on the hospital campus showing how each building will comply with the SPC-5/NPC-4 or 5 requirements whether by retrofit or by replacement and the type of service that will be provided in each general actue care hospital building per Section 130061(c)(5)

Building Number:	: 09	Building Na	me: Morgue / Storage				
Configuration : Replace with new SPC 5 and NPC 4 or NPC 5 building							
Type of Service Provided							
1	Nursing		Surgical		Obstetrical Cesarean/Deliv		Rehabilitation Therapy
	ntensiveCare		Anesthesia		Obstetrical		Renal Dialysis
	Pediatric/Adol escent		Clinical Lab		Recovery		
	Psychiatric Nursing		Radiological/ Imaging		Newborn/ WellBaby		Outpatient Surgery
	Obstetrical Ante/Postprtum		Pharmaceutical		Emergency		Central Plant
	ntermediate		Dietetic		Linergency		Gential Flain
	Care Skilled Nursing		Administration		Nuclear Medicine	X	Support Services

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Include information on the number of inpatient beds by type of Service provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Buildi	ng Number: 08	Building	Name: Po	wer Plant B	Building		
Тур	e of Service Prov	<u>rided</u>					
	Nursing	Inpatient Beds	0		Surgical	Obstetrical Cesarean/Deliv	Rehabilitation Therapy
	IntensiveCare	Inpatient Beds	0		Anesthesia		
	Pediatric/Adol escent	Inpatient Beds	0		Clinical Lab	Obstetrical Recovery	Renal Dialysis
	Psychiatric Nursing	Inpatient Beds	0		Radiological/ Imaging	Newborn/ WellBaby	Outpatient Surgery
	Obstetrical Ante/Postprtum	Inpatient Beds	0		Pharmaceutical	Emergency	X Central Plant
	Intermediate Care	Inpatient Beds	0		Dietetic	Nuclear Medicine	Support Services
	Skilled Nursing	Inpatient Beds	0		Administration		
	Total Beds this Building		0				

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Include information on the number of inpatient beds by type of unit provided by buildings that are classified as SPC-2, SPC-3, SPC-4, and SPC-5 per Section 130061(e)

Building Number:	08 Build	ing Name: Pow	er Plant Building		
Medical / Surgical (Ir	clude GYN)	Acute Respiratory	Care	Acute Psychiatric	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Perinatal (excluse No	ewborn / GYN)	Burn		Skilled Nursing	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Pediatric		intensive Care Nev Nursery	wborn	Intermediate Card	
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days
Intensive Care		Rehabilitation Center		Int. Care / develop	ment
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0	Inpatient 0 Bed	Inpatient 0 Days
Coronary Care		Chemical Dependency		Total Beds this Building Per Unit	Total Beds this Building Per Service
Inpatient 0 Bed	Inpatient 0 Days	Inpatient 0 Bed	Inpatient 0 Days	0	0